FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

| SECTION 1 - General Information | 'n | | | | | | | | | | | | | | | |
|---|---------------|--|-----------------------------------|--------------------------------------|--|---|-------|---|---|--|--|---|-------|---|--|------------------|
| MAP Communications, Inc 840 Greenbrier Circle Ste. 202 Chesapeake, VA 23320 | ns, Ince Ste. | dent ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | | | | | | | | | | | | Check his a char address. | Check here if this is a change of address. | |
| 2. Year Report Filed 2017 | | ω | Reporting Period Period Covered b | Period (Endi vered by Rep 2017 | Reporting Period (Ending Date of Pay Period Covered by Report) 3/10/2017 | У | | 4. Number of Reporting a. Test b. 16 | Number of Full-Time Employees during Selected Reporting Period (check one): Ewer than 16 (complete Sections I, IV, and V only) 16 or more (complete all sections) | aployees duri one): omplete Secondete all sections | ing Selected tions I, IV, and ons) | l V only) | | | | |
| SECTION II - Full-Time Employees. | es. | | | | | | | | | | | | | | | |
| | | | | | | | | Num (Report emplo | Number of Employees (Report employees in only one category) | /ees xne category) | | | | | | |
| Job | | | | | | | | _ | Race/Ethnicity | | | | | | | |
| Categories | | Hispanic or | icor | | | | | | Not-Hispanic or Latino | c or Latino | | | | | | Total |
| | | Lauio | - | | | Male | ale | | | | | Female | iale | | | Columns A - N |
| | 3 | Male | Female | White | Black or African American | Native Hawaiian or Other Pacific | Asian | American Indian or Alaska Native | Two or more races | White | Black or African American | Native Hawaiian or Other Pacific | Asian | American Indian or Alaska Native | Two or more races | |
| | | > | В | n | D | ш | п | G | ı | - | J | * | ٦ | Z | z | 0 |
| Executive/Senior Level Officials and Managers 1.1 | | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | 6 |
| First/Mid-Level Officials and 1.2 Managers | | 7 | 1 | 10 | 1 | 0 | 0 | 0 | 0 | 23 | 11 | 0 | 0 | 0 | 0 | 53 |
| Professionals | 2 | 0 | 0 | 6 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 00 |
| Technicians | ω | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | ı |
| Sales Workers | 4 | 1 | 1 | 2 | 0 | 0 | 0 | 0 | 0 | ω | 2 | 0 | 0 | 0 | 0 | 9 |
| Administrative Support Workers | 5 | 26 | 69 | 49 | 26 | 0 | 1 | 0 | 3 | 213 | 201 | 2 | 9 | 6 | 9 | 614 |
| Craft Workers | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Operatives | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Laborers and Helpers | 00 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Service Workers | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 | 0 | 0 | 0 |
| TOTAL 10 | | 34 | 71 | 71 | 28 | 1 | 1 | 0 | з | 243 | 214 | 2 | 9 | 7 | 9 | 693 |
| PREVIOUS YEAR TOTAL 11 | | 14 | 4 | 66 | 19 | 0 | 1 | 0 | 2 | 210 | 136 | ω | 7 | 5 | 14 | 521 |

| Title of Person Signing | Date 05/22/2017 | I cartify that to the best of my knowledge, information, and belief, all statements in this report are true and correct. | SECTION V - Certification | (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition, | company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. | This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this | SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311. | PREVIOUS YEAR TOTAL | TOTAL | Service Workers | Laborers and Helpers | Operatives | Craft Workers | Administrative Support Workers | Sales Workers | Technicians | Professionals | First/Mid-Level Officials and Managers | Executive/Senior Level Officials and Managers | | | | Categories | Job | |
|--|--|--|---------------------------|---|--|--|--|---------------------|-------|-----------------|----------------------|------------|---------------|--------------------------------|---------------|-------------|--------------------------------------|---|---|--------|---|------------------|------------------------|----------------|--|
| | Typed or F Grant | owledge, | | ting parti | ny body h e Commit | e Commi | mination | 1 | 10 | 9 | 00 | 7 | 6 | υn | 4 | ω | 2 | 1.2 | 11 | | ₹ | | | | |
| | yped or Printed Nam Grant Sibley | informati | | es involve | ssion that aving con ssion that ssion that es involve | ssion that | Compla | 5 | 10 | 0 | 0 | 0 | 0 | 10 | 0 | 0 | 0 | 0 | 0 | > | Male | Lauio | Hispanic or | | |
| | Typed or Printed Name of Person Signing Grant Sibley | on, and beli | | t no compla npetent juris t the following ed, date filed | no complai | ints Pursua | 13 | 19 | 0 | 0 | 0 | 0 | 19 | 0 | 0 | 0 | 0 | 0 | 8 | Female | 5 | icor | | | |
| | on Signing | ef, all statem | | , courts or ac | diction in suc g complaints | nts regarding | nt to 47 CFF | 9 | 4 | 0 | 0 | 0 | 0 | 4 | 0 | 0 | 0 | 0 | 0 | С | White | | | | |
| OF ANY ST | | ents in this re | | jencies before | th matters dur alleging viola | violations of | 22.321, 23. | 5 | 3 | 0 | 0 | 0 | 0 | 3 | 0 | 0 | 0 | 0 | 0 | D | Black or African American | | | | |
| FALSE STA | | port are true a | | which the m | ing the calend | the equal em | 55, 90.168, 10 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Е | Native Hawaiian or Other Pacific Islander | × | | | |
| SE OR CON | Signature | and correct. | | atter has bee | dar year cove | ployment prov | 1.4, and 101 | ı | 5 | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | F | Asian | Male | | | |
| STRUCTION | ٤ | | | n heard, file n | red by this rep ny equal empl | isions of Fed | 311. | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 6 | American Indian or Alaska Native | | | | Num (Report empl |
| FORMARE BERMIT (47 | X | 1 | 7 | umber or othe | ort. | eral, state, ter | | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | н | Two or more races | | Not-Hispar | Race/Ethnicity | Number of Employees (Report employees in only one category) |
| PUNISHABLI U.S.C. 312 (A | _>(| |) | er designation | rtunity statute | ritorial, or loca | Ì | 38 | 26 | 0 | 0 | 0 | 0 | 26 | 0 | 0 | 0 | 0 | 0 | - 3 | White | | Not-Hispanic or Latino | ŧψ | one category |
|)(1) AND/OR | | | | , and current | have been fil | al statutes hav | | 31 | 48 | 0 | 0 | 0 | 0 | 48 | 0 | 0 | 0 | 0 | 0 | ľ | Black or African American | | | |) |
| FORFEITUR | | | | status or disp | ed against thi | ve been filed : | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Hawaiian or Other Pacific Islander X | Native Hawaiian or Other Pacific Islander | Fen | | | | | | |
| WILLFULLY FALSE STATEMENTS MADE ON THIS FORMARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION BERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503). | (757) 42 | | | company. sition. | against this | İ | 4 | 6 | 0 | 0 | 0 | 0 | 6 | 0 | 0 | 0 | 0 | 0 | ٦ | Asian | Female | | | | |
| | elephane No. (757) 424–1191 | | | | | | | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | š | American Indian or Alaska Native | | | | |
| | 1 | | | | | | | 2 | 5 | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | z | Two or more races | | | | |
| EVOCATION | | | | | | | | 111 | 128 | 0 | 0 | 0 | 0 | 128 | 0 | 0 | 0 | 0 | 0 | 0 | | Columns A - N | Total | | |